



# SOLDIERS' ANGELS

## Incoming/outgoing in-kind form

<b>Incoming</b>	<b>Outgoing/Date:</b>
<b>Donor Name:</b> <b>Phone:</b> <b>Address :</b> <b>Email :</b>	<b>Soldiers' Angels Representative:</b> <b>Phone:</b> <b>Email:</b>
<b>Date of Donation</b> <b>Contact Person</b> <b>Phone</b>	<b>VA/Other delivered to:</b>

Qty.	Description of item	SVG	#exp	Date expensed	Value per item	Total Value
Total Value of Donation						
<b>Donor Signature:</b>						
<b>SA Representative Signature:</b>						

### Soldiers' Angels

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